

EDITORIALS

WHAT IS NAPRAPATHY?

The Journal is not infrequently asked this question. We will answer it by quotations from "The Pacific Naprapath," published apparently by one "Dr." H. D. Reynard. The opening article in Vol. 1, No. 1, is by "Dr." Oakley (not Dudley) Smith, "founder and president of the Chicago College of Naprapathy." The leading editorial states: "If I were speaking to the readers of this paper in a group and should mention some object with which they were all familiar, it is very improbable that any two would think of it in the same way. Take the word organ, for instance, one would immediately think of the great pipe organ in their church; another, the little organ down at the Mission; still another, the little parlor organ they had at home when a child, or if some one happens to be a student of anatomy he thinks of the organs of the body, organ of hearing, seeing, breathing or some other of the bodily organs." Some of the questions and answers published on page five are: "Does naprapathy teach that displaced vertebrae cause disease? No, because naprapathy has proven in laboratory and clinic that vertebrae do not become displaced, or get out of place. On the contrary, they get too much in place, are drawn too closely together. Does the naprapath 'adjust' the vertebrae? No, he uses the vertebrae as levers to stretch shrunken and contracted ligaments. Does naprapathy teach that the nerves are pinched by the bones of the spine? No. It teaches that the nerve function is impaired by the contraction of the connective tissue through which the nerves pass. Naprapathy teaches that the real disease is the shrunken ligament, and that conditions in the body heretofore believed to be disease are but the symptoms of the real disease in the ligament, THE LIGATIGHT, the predisposing cause."

Now if you don't know what Naprapathy is, ask one of your friends to get you a copy of the pamphlet referred to and study the illustrations.

IMPROVEMENT IN MEDICAL EDUCATION AND LICENSURE

The Journal of the American Medical Association in a recent number published the annual statistics regarding the conditions governing licensure for those who treat the sick in all states of the United States. There is much that is encouraging in these figures. Nearly 80 per cent of all licenses issued during last year were to graduates of Class A medical schools. The gain in this respect has been healthy and gradual year after year and conditions seem to be favorable for further gains. There are some sad situations in a few states. Connecticut and Arkansas are almost open shop for the licensure of the poorly educated and some of those licensed last year apparently had not even made gestures at education. Of the seventy-four osteopaths licensed as physicians and

surgeons last year in the entire United States, forty-eight were licensed in California, thirteen in Massachusetts, eight in Colorado and five in Texas. These licentiates, graduates of colleges seriously deficient in instructional facilities, were given by law all the responsibilities of doctors of medicine, including the right to prescribe narcotics and alcohol. Let us hope in the interest of the health and happiness of their public that some of them at least will make up their educational deficiencies and not rest too heavily upon their political title.

The statistics do not go into the problem of the licensure of the great variety of sects who claim to believe they can "cure" disease by some sort of hocus-pocus without a knowledge of the anatomy, physiology and chemistry of the human body and the natural history of disease. Nor do the statistics include those "doctors" who are above the law, who treat alleged diseases by alleged superior contact with God and who "heal" (?) without special education, without authorization by law, without regulation and without taxation.

NEW YORK TAKES ANOTHER STEP IN THE SOCIALIZATION OF MEDICINE AND PUBLIC HEALTH

Physicians have watched with interest the progress of the "State medicine" program promoted by public health organizations of New York. According to their own publication, their program of "health centers" failed to pass the legislature in 1920 and 1921 because of the opposition of physicians. The last legislature passed a law providing "that when any county containing no first or second-class city should undertake a new public health project and make an appropriation therefor, either for small hospitals in rural districts or for public health activities of any other kind, the State should appropriate a similar amount dollar for dollar. The State Commissioner of Health must certify that the work undertaken is necessary and in conformity with the standards of the Department of Health."

The State Board of Health congratulate themselves upon the success of this measure in the following ingenuous language:

"It is gratifying that the outcry over the imaginary dangers of 'socialism' and 'State medicine' has been absent from the whole course of this year's consideration of the question. On the contrary, New York State has quietly and rationally attacked a problem which equally exists in other parts of the country, and has taken a promising step in the direction of its solution. This has been accomplished amid good feeling through the application of the required amount of that American common sense which meets new conditions with concrete and expedient measures, and does not stop to worry too much about the abstract economic implications."

Many of the men in authority at the New York State Board of Health headquarters are well-known physicians. Some of them are also well versed in State politics of which they are an essential element. They are not unknowingly misleading them-